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POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	09/751,456
	Filing Date	12-29-2000
	First Named Inventor	Gopal N. Iyer
	Title	METHOD FOR REVERSE....
	Art Unit	2681
	Examiner Name	Sheila B. Smith
	Attorney Docket Number	00014/ATTWP267US

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

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OR

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Practitioner(s) Name	Registration Number

Please recognize or change the correspondence address for the above-identified application to:

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OR

<input type="checkbox"/> Firm or Individual Name	AMIN, TUROCY& CALVIN, LLP			
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Country	United States			
Telephone	216-535-7968	Email	hamin@thepatentattorneys.com	

I am the:

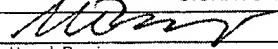
☐ Applicant/Inventor.

OR

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

☐ Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____

SIGNATURE of Applicant or Assignee of Record

Signature		Date	11-17-08
Name	Umesh Desai	Telephone	512-372-59
Title and Company	Secretary, AT&T Intellectual Property I, LP		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

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